PATENT APPLICATION FEE DETERMINATION  Effective November 10, 1998	RECOR
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 Applic	ation or	Docto	et Numi	ber
 00	3/8	33'	78 k	, =

CLAIMS AS FILED - PART I							;	SMALL	ENTITY		OTHER	THAN		
(Column 1) (Column 2)							TYPE		OR	SMALL				
ĸ	OR .		NUMBE	R FLED		NUMBER	EXTRA	'		RATE	FEE		RATE	FEE
à	SICFEE		700								380.00	OR		768.6
π	TAL CLAIMS		<u> </u>	S winns	20=	. 8		_	1.	X\$ 9=		OR	X\$18=	144
IM	DEPENDENT CI	LAIMS	3	hinus	3 =	•			Γ	X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							T	+130=		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL		OR	TOTAL	8590		
(1)	5-16-05		S AS A	MENDEC		ART II	(Colum	nn 3)	•	SMALL	ENTITY	OR	OTHER	
			PLUS.			HIGHEST	1000		F		ADDI-	1		ADD-
NTA		AF	ANONG ' TER EDMENT		Pf	NUMBER REVIOUSLY PAID FOR	PRES			RATE	TIONAL		RATE	TION
	Total		0	Minus		28	-2			X\$ 9=		OR	X\$16=	100.00
AMENDMENT	Independent	•	3	Minus	244	<u> </u>	Ŀ		r	X39=		OR	X78=	
	FIRST PRESE	ENTATIO	N OF M	JUTTPLE DEI	PENC	ENT CLAIM			T.	+130=		OR	+260=	
110	150								<u> </u> _	TOTAL		'	TOTAL	400.00
1	0/28/05	2 (Coti	emo 1)		10	column 2)	(Colur	nn 3)	AD	OTT. FEE		OR	ADOIT. FEE	100.00
		a	AMS	1000		HIGHEST					ADDI-	$  \setminus  $		ADDI
ENT B		AF	AINING TER DMENT		Pf	NUMBER REVIOUSLY PAID FOR	PRES		l	RATE	TIONAL		RATE	TION
AMENDMENT	Total		30	Minus .	88	30	- (	3		X\$ 9=	. 1	OR	X\$18=	
AME	Independent	•	3	Minus	444		<u> </u>			X39=		 OR.	X78=	
	FIRST PRESE	NIAHO	N OF M	JUTIPLE DE	ENL	ENI COM		٠,	1	+130=		OR	+260=	
	.1 4								L	TOTAL		OR	TOTAL	
4	1/25/09	6.					10-1-	01	AD	OTT. FEE		lou	ADDIT. FEE	<u> </u>
-		COR	umn 1) Alms			cotumn 2) Righest	(Colur	101 31	_					
ENTC		REM	AINING TER		PF	NUMBER REVIOUSLY	PRES EXT		١	RATE.	ADDI- TIONAL		RAȚE.	ADD'
	Total	AMEN	DMENT	Minus		AID FOR	. (	5		X\$ 9=	FEE	OR	X\$18=	FEE C)
AMENDA	Independent	•	3	Minus	425	3	•	O	-	X39=			X78=	3
4	FIRST PRESE	OTATIO	N OF ML	JLTIPLE DE	PENC	ENT CLAIM			_	-wo		OR	<u> </u>	$\overline{\mathcal{L}}$
		•		-					Ŀ	+130 <b>=</b>		OR	+260=	0
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Proviously Pald For" IN THIS SPACE is less than 20, enter "20."  ADOIT. FEE  ***If the "Highest Number Proviously Pald For" IN THIS SPACE to less than 3, enter "2."									OR	TOTAL ADOIT, FEE				
	The Tilghest Nurs	ber Prev	fourty Pai	d For' (Total or	Inde	pendent) is the	highest	number (	iound	i in the ap	propriate bo	x in co	tunn 1.	

FORM PTO 475

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